POSITION	INITIALS	ID NO.	DATE	
3			1/	
FEE DETERMINATION	(D:	10000	Molne	
O.I.P.E. CLASSIFIER	\$77m	ジン	11/9	
FORMALITY REVIEW	WN	67479	12/1/10	
RESPONSE FORMALITY REVIEW		21476	2/16/01	
		11-1-10-		

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

(Thr	Allowed rough numeral) Canceled	Α	Interference Appeal Objected	ce
		Date	Claim	Date
1 200				
Original	Claim Substitution Original A & Month of the Color of the		Final	
1 1 1 1 1	51 :-	- 	101	++++
 	52		102	- - - - - - - - - - - - - - - - - - -
	53		103	
	54		104	++++++
 	55		105	
1-4-6/ 1 /1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	56		106	
 	57		107	
a	(58)		108	
- gl	59) -		109	
	(60)		110	
	(61), i		111	
12	62		112	
ts	63		113	
14	64		114	
15	65		115	
200 /	66		116	
TONY -	67		117	
(18)	68		118	
19 11 1	69		119	
20	70		120	
. 21	71		121	
22	72		122	
23	73		123	
24	74		124	
25	75		125	
26	76		126	1
. 27	77		127	
28	78		128	
29	79		129	
30	80		130	
31	81		131	_ _ _ _ _ _
32	92		132	
33 ,.	83		133	_
34	84		134	- - - - - - - - - -
35 .	85		135	
36	86		136	
37	87		137	
38	88		138	
39	89		139	
40	90		140	
(41) /	91		141	
42	92	 	142	
43	93		143	
44	94		144	
. 45	951		145	 -
46 . 1	96	 	146	
47	97.		147	
48	98:	 	148	
49	991	 	149	
50	100		150	<u>, , , , , i , , , , , , , , , , , , , ,</u>

If more than 150 claims or 10 actions staple additional sheet here